

Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS298AGZ	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/21/2009
NAME OF PROVIDER OR SUPPLIER PRESTIGE ASSTD LV AT MIRA LOMA		STREET ADDRESS, CITY, STATE, ZIP CODE 2520 WIGWAM PARKWAY HENDERSON, NV 89014		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
Y 000	<p>Initial Comments</p> <p>The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws.</p> <p>This Statement of Deficiencies was generated as a result of an annual State Licensure survey initial State Licensure survey conducted at your facility on 7/21/09. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division.</p> <p>The facility was licensed for 94 Residential Facility for Group beds for elderly and disabled persons Category II, and 30 Residential Facility beds which provide care for persons with Alzheimer's disease Category II residents. The census at the time of the survey was 96. Twenty-one resident files were reviewed and fifteen employee files were reviewed. One discharged resident file was reviewed. The facility received a grade of D.</p> <p>The following deficiencies were identified:</p>	Y 000		
Y 072 SS=E	<p>449.196(3) Qualications of Caregiver-Med Training</p> <p>NAC 449.196</p> <p>3. If a caregiver assists a resident of a residential facility in the administration of any medication, including, without limitation, an over-the-counter medication or dietary supplement, the caregiver must:</p> <p>(a) Receive, in addition to the training required pursuant to NRS 449.037, at least 3 hours of training in the management of medication. The</p>	Y 072		

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TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 072	Continued From page 1 caregiver must receive the training at least every 3 years and provide the residential facility with satisfactory evidence of the content of the training and his attendance at the training; and (b) At least every 3 years, pass an examination relating to the management of medication approved by the Bureau. This Regulation is not met as evidenced by: Based on record review on 7/21/09, the facility failed to ensure 1 of 3 medical technicians had completed the required three hour medication management refresher training every three years (Employee #8). This was a repeat deficiency from the 10/30/08 State Licensure survey. Severity: 2 Scope: 2	Y 072		
Y 103 SS=F	449.200(1)(d) Personnel File - NAC 441A NAC 449.200 1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (d) The health certificates required pursuant to chapter 441A of NAC for the employee. This Regulation is not met as evidenced by: Based on record review on 7/21/09, the facility	Y 103		

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Y 103	Continued From page 2 failed to ensure 6 of 15 caregivers complied with NAC 441A.375 regarding tuberculosis testing (Employee #2, #4, #6, #7, #8, #9 and #13). This was a repeat deficiency from the 10/30/08 State Licensure survey. Severity: 2 Scope: 3	Y 103			
Y 172 SS=C	449.209(2) Health and Sanitation-Outside garbage NAC 449.209 2. Containers used to store garbage outside of the facility must be kept reasonably clean and must be covered in such a manner that rodents are unable to get inside the containers. At least once each week, the containers must be emptied and the contents of the containers must be removed from the premises of the facility. This Regulation is not met as evidenced by: Based on observation on 7/21/09, the facility failed to ensure the container used to store garbage outside the facility was covered. Severity: 1 Scope: 3	Y 172			
Y 173 SS=C	449.209(3) Health and Sanitation-Inside garbage NAC 449.209 3. Containers used to store garbage in the kitchen and laundry room of the facility must be covered with a lid unless the containers are kept in an enclosed cupboard that is clean and prevents infestation by rodents or insects. Containers used to store garbage in bedrooms	Y 173			

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Y 173	Continued From page 3 and bathrooms are not required to be covered unless they are used for food, bodily waste or medical waste. This Regulation is not met as evidenced by: Based on observation on 7/21/09, the facility failed to ensure the containers to store garbage in the laundry room were covered. Severity: 1 Scope: 3	Y 173		
Y 255 SS=C	449.217(6)(a)(b) Permits - Comply with NAC 446 NAC 449.217 6. A residential facility with more than 10 residents must: (a) Comply with the standards prescribed in chapter 446 of NAC. (b) Obtain the necessary permits from the Bureau of Health Protection Services of the Division. This Regulation is not met as evidenced by: Based on observation on 7/21/09, the facility failed to comply with the standards prescribed in chapter 446 of NAC. The facility failed to ensure the following:	Y 255		

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Y 255	Continued From page 4 - Wiping cloths were kept in sanitizing solution when not in use. - Hair nets were in use at all times. - Ensure proper cleanliness of the walk in rack, can opener, mixer, and stove top. - Metal scoops with handles were used for dry products such as rice and flour. - All food products were dated after they were opened. Severity: 1 Scope: 3	Y 255		
Y 393 SS=F	449.226(4)(a)-(c) Safety Requirements NAC 449.226 4. In a residential facility with more than 10 residents: (a) Each resident must be provided with, or the bedroom and bathroom of each resident must be equipped with, an auditory system that is monitored by a member of the staff of the facility. (b) An auditory system must be available for use in the bathroom of each resident of the facility if the facility was issued its initial license on or after January 14, 1997, so that a resident needing assistance can alert a member of the staff of the facility of that fact from the toilet and the shower. (c) A bathroom that is located in a common area of the facility must be equipped with an auditory system that is monitored by a member of the staff of the facility. This Regulation is not met as evidenced by: Based on interview and observation on 7/21/09, the facility failed to ensure an auditory system was functional for the memory care unit.	Y 393		

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Y 393	Continued From page 5 Severity: 2 Scope: 3	Y 393		
Y 693 SS=F	449.2712(2) Oxygen-Caregiver monitor resident ability NAC 449.2712 2. The caregivers employed by a residential facility with a resident who requires the use of oxygen shall: (a) Monitor the ability of the resident to operate the equipment in accordance with the orders of a physician. (b) Ensure That: (1) The resident's physician evaluates periodically the condition of the resident which necessitates his use of oxygen; (2) Signs which prohibit smoking and notify persons that oxygen is in use are posted in areas of the facility in which oxygen is in use or is being stored; (3) Persons do not smoke in those areas where smoking is prohibited; (4) All electrical equipment is inspected for defects which may cause sparks. (5) All oxygen tanks kept in the facility are secured in a stand or to a wall; (6) The equipment used to administer oxygen is in good working condition; (7) A portable unit for the administration of oxygen in the event of a power outage is present in the facility at all times when a resident who requires oxygen is present in the facility; and (8) The equipment used to administer oxygen is removed from the facility when it is no longer needed by the resident.	Y 693		

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Y 878	Continued From page 7 This Regulation is not met as evidenced by: Based on record review and interview on 7/21/09, the facility failed to ensure 2 of 20 residents received medications as prescribed (Resident #9, and #17). Severity: 2 Scope: 1	Y 878			
Y 991 SS=F	449.2756(1)(b) Alzheimer's Fac door alarm NAC 449.2756 1. The administrator of a residential facility which provides care to persons with Alzheimer's disease shall ensure that: (b) Operational alarms, buzzers, horns or other audible devices which are activated when a door is opened are installed on all doors that may be used to exit the facility. This Regulation is not met as evidenced by: Based on observation on 7/21/09, the facility failed to ensure the facility was equipped with door alarms on all exit doors to the facility. The doors located in the memory care unit which exited to the north courtyard, lacked and audible alarm sound when opened. The alarms were turned to the "off" position. Severity: 2 Scope: 3	Y 991			
Y 994 SS=F	449.2756(1)(e) Alzheimer's fac knives NAC 449.2756 1. The administrator of a residential facility which provides care to persons with Alzheimer's	Y 994			

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Y 994	<p>Continued From page 8</p> <p>disease shall ensure that: (e) Knives, matches, firearms, tools and other items that could constitute a danger to the residents of the facility are inaccessible to the residents.</p> <p>This Regulation is not met as evidenced by: Based on observation on 7/21/09, the facility failed to ensure knives found in the kitchen, located in the Memory Care unit, were inaccessible to the residents.</p> <p>Severity: 2 Scope: 3</p>	Y 994		

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